

PART B - FEE(S) TRANSMITTAL

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20582 7590 04/29/2003

PENNIE & EDMONDS LLP
 1667 K STREET NW
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 WASHINGTON, DC 20006



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	(Depositor's name)
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	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/660,287	09/12/2000	Paul C. Weaver	8932-146	6504

TITLE OF INVENTION: BONE PLATING SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$0	\$1300	07/29/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
ROBERT, EDUARDO C	3732	606-069000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SR/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.
2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

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Paoli, PA

Please check the appropriate assignee category or categories (will not be printed on the patent) individual corporation or other private group entity government

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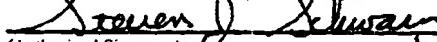
Issue Fee
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Advance Order - # of Copies 10

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 (Authorized Signature) (Date)

Steven J. Schwarz Reg. No. 47,070 July 28, 2003

For: Brian M. Rothery, Reg. No. 35,340

07/30/2003 GGEBREG1 00000158 161150 09660287

01 FC:1501 1300.00 DA
 02 FC:8001 30.00 DA

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